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| TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i> | Application Number | 10/615,380 | |
| | Filing Date | 10/615,380 | |
| | First Named Inventor | Hiroiyuki NISHIMURA et al. | |
| | Group Art Unit | 3748 | |
| | Examiner Name | Binh Q. Tran | |
| Total Number of Pages in This Submission | | Attorney Docket Number | 740819-1019 |

| ENCLOSURES <i>(check all that apply)</i> | | |
|---|--|---|
| <input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Declaration and Power of Attorney <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request for Corrected Filing Receipt with Enclosures <input type="checkbox"/> A self-addressed prepaid postcard for acknowledging receipt <input checked="" type="checkbox"/> Other Enclosure(s) <i>(please identify below):</i> Response to Restriction/Election Requirement |
| Remarks | | <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 19-2380 for the above identified docket number. |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | |
|--|--|
| Firm or Individual name | Donald R. Studebaker, Reg. No. 32,815 Nixon Peabody LLP 401 9 th Street, N.W. Suite 900 Washington, D.C. 20004-2128 |
| Signature | |
| Date | October 6, 2004 |

| CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)] | |
|--|-----------------------|
| I hereby certify that this correspondence is being: | |
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| Date | Signature |
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:)
Hiroyuki NISHIMURA et al.) Group Art Unit: 3748
Serial No. 10/615,380) Examiner: Binh Q. Tran
Filed: July 9, 2003)
For: ENGINE EXHAUST PARTICULAR)
AFTER-TREATMENT SYSTEM)

RESPONSE TO RESTRICTION/ELECTION REQUIREMENT

Mail Stop Non-Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

In response to the Office Action dated September 22, 2004, Applicants hereby elect the species of Figs. 1-5 for prosecution in this application with indication that claims 1, 9-13 and 15-16 are readable thereon.

Should the Examiner believe a conference would be of benefit in expediting the prosecution of the instant application, he is hereby invited to telephone counsel to arrange such a conference.

Respectfully submitted,

Donald R. Studebaker
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